



**All Civil Rights complaints, verbal or written, must be submitted within 180 days to:**

Office of Public Instruction  
School Nutrition Programs  
PO Box 202501  
Helena, MT 59620-2501

Phone: 406.444.2501  
Fax: 406.444.1488

Please obtain and report to School Nutrition Programs the minimum information below. This procedure is in addition to other procedures established by the Local Educational Agency.

**Complainant:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**Person taking complaint:**

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Describe the nature of the incident that led the complainant to feel discrimination was a factor.

On which basis does the complainant feel discrimination exists?

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Race            | <input type="checkbox"/> Sex        |
| <input type="checkbox"/> Color           | <input type="checkbox"/> Age        |
| <input type="checkbox"/> National origin | <input type="checkbox"/> Disability |

Person who may have knowledge of the discriminatory actions/circumstances of the incident:

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

What are the dates the alleged discriminatory actions occurred, or if continuing, the duration of such actions?

What corrective action (if any) has the Local Educational Agency taken to resolve the complaint?  
Has the complaint been resolved successfully?

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.